

# TIPS for TEENS

## COCAINE

### THE TRUTH ABOUT COCAINE

**SLANG: COKE/FLAKE/C/COCA/BUMP/TOOT/SNOW/BLOW/ROCK (CRACK)**

## GET THE FACTS

**COCAINE AFFECTS YOUR BRAIN.** Cocaine causes a brief high that makes the user feel more energetic, talkative, and alert; this can be followed by feelings of restlessness, irritability, and panic.<sup>1</sup> Cocaine is highly addictive and can increase the risk of negative psychological states, including paranoia, anxiety, and psychosis.<sup>2,3</sup>

**COCAINE AFFECTS YOUR BODY.** People who use cocaine often don't eat or sleep regularly. They can experience increased heart rate, muscle spasms, and convulsions. Snorting cocaine also can permanently damage nasal tissue.<sup>4</sup>

**COCAINE AFFECTS YOUR EMOTIONS.** Using cocaine can change your mood and make you feel paranoid, angry, and anxious.<sup>5</sup>

**COCAINE IS ADDICTIVE.** Repeated cocaine use changes the brain circuits that process feelings of pleasure, which can cause a person to lose interest in other areas of their life, like school, friends, and sports.<sup>6</sup> It also damages brain circuits that control stress, decision-making, and impulse control, making it more difficult to stop using, even when it has negative effects on your life and health. Frequent use also can lead to tolerance and withdrawal, so you need more of the drug just to feel normal.<sup>7</sup>

**COCAINE CAN KILL YOU.** Cocaine use can cause seizures, strokes, and comas. Cocaine can change the way the heart beats and lead to a heart attack. People who share needles can contract hepatitis, HIV, and other diseases.<sup>8</sup> It also is particularly dangerous to consume cocaine and alcohol at the same time; they combine to produce a third chemical, cocaethylene, that is far more toxic than either cocaine or alcohol alone.<sup>9</sup>

**COCAINE ADDICTION IS TREATABLE.** Behavioral drug treatments can help someone stop using cocaine and recover from addiction.<sup>10</sup>

## Q&A

### Q. IS COCAINE USE A PROBLEM?

**A.** **YES.** There were 1.9 million current (past-month) cocaine users ages 12 or older in 2015.<sup>11</sup> About 900,000 users ages 12 or older met the criteria for a diagnosable disorder with significant negative effects because of their cocaine use in the past year.<sup>12</sup> In 2014, overdoses and deaths caused by cocaine use increased by 42 percent.<sup>13</sup>

### Q. WHAT IS THE DIFFERENCE BETWEEN COCAINE AND CRACK?

**A.** **COCAINE IS A WHITE POWDER** that can be snorted or dissolved in water and injected. Crack, an altered form of cocaine, is a rock crystal that is usually smoked.<sup>14</sup>

### Q. WHAT IS THE MOST DANGEROUS WAY TO USE COCAINE?

**A.** **ANY METHOD OF COCAINE USE CARRIES A RISK** of addiction and/or overdose.<sup>15</sup> Snorting cocaine can result in frequent nosebleeds or loss of sense of smell. Injecting cocaine can cause infected sores at the injection sites or exposure to serious diseases such as HIV and hepatitis C by sharing needles. Using cocaine and alcohol at the same time is particularly dangerous. However, all methods of cocaine use can lead to severe cardiovascular, respiratory, and neurological effects.

### THE BOTTOM LINE:

Cocaine is illegal, addictive, and dangerous.<sup>16,17</sup> Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

### LEARN MORE:

Get the latest information on how drugs affect the brain and body at [teens.drugabuse.gov](http://teens.drugabuse.gov).

### TO LEARN MORE ABOUT COCAINE, CONTACT:

**SAMHSA**

**1-877-SAMHSA-7 (1-877-726-4727)**

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**TTY 1-800-487-4889**

[www.samhsa.gov](http://www.samhsa.gov)

[store.samhsa.gov](http://store.samhsa.gov)



**SAMHSA**

Substance Abuse and Mental Health Services Administration



# BEFORE YOU RISK IT!

1

**KNOW THE LAW.** Cocaine—in any form—is illegal.<sup>18</sup>

2

**STAY INFORMED.** Even first-time cocaine use can be fatal.<sup>19</sup>

3

**KNOW THE RISKS.** Combining cocaine with other drugs or alcohol is extremely dangerous. The effects of one drug can magnify the effects of another, and mixing substances can be deadly.<sup>20</sup>

4

**STAY IN CONTROL.** Cocaine impairs your judgment, which may lead to risky sexual behaviors. This can increase your risk for HIV/AIDS, other diseases, rape, and unplanned pregnancy.<sup>21</sup>

5

**LOOK AROUND YOU.** The majority of teens aren't using cocaine. In 2015, less than 1 percent of 12- to 17-year-olds reported ever using cocaine in their lifetime.<sup>22</sup>



## WHAT CAN YOU DO TO HELP SOMEONE WHO IS USING COCAINE?

### BE A FRIEND. SAVE A LIFE.

Encourage your friend to stop using or seek help from a parent, teacher, or other caring adult.

For 24/7 free and confidential information and treatment referrals in English and Spanish, call SAMHSA's National Helpline at:

**1-800-662-HELP (1-800-662-4357)**

or visit the SAMHSA Behavioral Health Treatment Services Locator at [findtreatment.samhsa.gov](http://findtreatment.samhsa.gov)

<sup>14,8,10,16,21,24</sup> National Institute on Drug Abuse. (2016). *Research report series: Cocaine*. Retrieved from <https://www.drugabuse.gov/publications/research-reports/cocaine/what-cocaine>

<sup>2,17,18</sup> U.S. Department of Justice and Drug Enforcement Administration. (2015). *Drugs of abuse: A DEA resource guide*. Retrieved from [http://www.justice.gov/dea/pr/multimedia-library/publications/drug\\_of\\_abuse.pdf#page=45](http://www.justice.gov/dea/pr/multimedia-library/publications/drug_of_abuse.pdf#page=45)

<sup>3,7,23</sup> National Institute on Drug Abuse. (n.d.). Drug facts: Cocaine. *NIDA for Teens*. Retrieved from <http://teens.drugabuse.gov/drug-facts/cocaine>

<sup>5</sup> National Institute on Drug Abuse. (n.d.). Signs of cocaine abuse and addiction. *Easy-to-Read Drug Facts*. Retrieved from <https://easyread.drugabuse.gov/content/signs-cocaine-use-and-addiction>

<sup>6</sup> Partnership for Drug-Free Kids. (n.d.). Look for warning signs. *Partnership for Drug-Free Kids*. Retrieved from <http://www.drugfree.org/think-child-using/look-for-signs-and-symptoms>

<sup>9</sup> Pennings, E. J., Leccese, A. P., & Wolff, F. A. (2002). Effects of concurrent use of alcohol and cocaine. *Addiction*, 97, 773–783. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/12133112>.

<sup>11,22</sup> Center for Behavioral Health Statistics and Quality. (2016). *Results from the 2015 National Survey on Drug Use and Health: Detailed tables*. Retrieved from <http://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015.pdf>

<sup>12</sup> Center for Behavioral Health Statistics and Quality. (2016). *Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health*. (HHS Publication No. SMA 16-4984, NSDUH Series H-51). Retrieved from <http://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015/NSDUH-FFR1-2015/NSDUH-FFR1-2015.htm>

<sup>13</sup> National Institute on Drug Abuse. (2015). *Overdose death rates*. Retrieved from <https://www.drugabuse.gov/related-topics/trends-statistics/overdose-death-rates> and [https://www.drugabuse.gov/sites/default/files/overdose\\_data1999-2014.xls](https://www.drugabuse.gov/sites/default/files/overdose_data1999-2014.xls)

<sup>14,19,20</sup> National Institute on Drug Abuse. (2016). *Drug facts: Cocaine*. Retrieved from <http://www.drugabuse.gov/publications/drugfacts/cocaine>

<sup>15</sup> Center for Substance Abuse Treatment. (2006). Session 4: Methamphetamine and cocaine. *Matrix Intensive Outpatient Treatment for People with Stimulant Use Disorders: Counselor's Family Education Manual*. Retrieved from <http://store.samhsa.gov/product/Matrix-Intensive-Outpatient-Treatment-for-People-with-Stimulant-Use-Disorders-Counselor-s-Family-Education-Manual-w-CD/SMA13-4153>

<sup>25</sup> U.S. Drug Enforcement Agency. (2017). How to identify drug paraphernalia. *Get Smart About Drugs*. Retrieved from <https://www.getsmartaboutdrugs.gov/content/how-identify-drug-paraphernalia>

## MORE INFORMATION



FOR MORE INFORMATION OR FOR RESOURCES USED IN THIS "TIPS for TEENS,"  
visit [store.samhsa.gov](http://store.samhsa.gov) or call 1-877-SAMHSA-7 (1-877-726-4727) (English and Español).  
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# TIPS for TEENS

## HEROIN

### THE TRUTH ABOUT HEROIN

**SLANG: SMACK/HORSE/BROWN SUGAR/JUNK/  
BLACK TAR/BIG H/DOPE/SKAG/NEGRA/SKUNK/  
WHITE HORSE/CHINA WHITE/CHIVA/  
HELL DUST/THUNDER**

## GET THE FACTS

**HEROIN AFFECTS YOUR BRAIN.** Heroin, an illicit opioid, enters the brain quickly. It slows down the way you think, reaction time, and memory.<sup>1</sup> Over the long term, heroin can change the brain in ways that lead to addiction.

**HEROIN AFFECTS YOUR BODY.** Heroin slows down your heartbeat and breathing, sometimes so much that it can be life-threatening. Heroin poses special problems for those who inject it because of the risks of HIV, hepatitis B and C, and other diseases that can occur from sharing needles.<sup>2</sup>

**HEROIN IS HIGHLY ADDICTIVE.** Heroin enters the brain rapidly and causes a fast, intense high. Repeated heroin use increases the risk of developing an addiction; someone addicted to heroin will continue to seek and use the drug despite negative consequences.<sup>3</sup>

**HEROIN IS NOT WHAT IT MAY SEEM.** Other substances are sometimes added to heroin. They clog blood vessels leading to the liver, lungs, kidneys, and brain and lead to inflammation or infection.<sup>4</sup> Powder sold as heroin may also contain other dangerous chemicals, such as fentanyl, that increase the risk of fatal overdose.<sup>5,6</sup>

**HEROIN CAN KILL YOU.** Heroin slows—and sometimes stops—breathing, which can result in death. In 2015, there were 2,343 overdose deaths related to heroin or other illicit opioids among people ages 15 to 24.<sup>7</sup>

**HEROIN ADDICTION IS TREATABLE.** Medication, in combination with behavioral treatment, can help people stop using heroin and recover from addiction.<sup>8</sup> Building a support system that helps people stop using heroin and other opioids is also important. Medications such as buprenorphine, methadone, and naloxone greatly increase the chance of recovery and reduce the risk of overdose. Friends and family members should have naloxone nearby if possible in case of overdose.\*

\* No official support or endorsement by SAMHSA or HHS for the opinions, resources, and medications described is intended to be or should be inferred. The information presented in this document should not be considered medical advice and is not a substitute for individualized patient or client care and treatment decisions.

## Q & A

**Q. IS IT TRUE THAT HEROIN ISN'T RISKY IF YOU SNORT OR SMOKE IT INSTEAD OF INJECTING IT?**

**A. NO.** Heroin is very dangerous regardless of how it is used. While injecting drugs carries additional risk of infectious disease, taking heroin can be dangerous in any form. You can still die from an overdose or become addicted by snorting or smoking it. Heroin may also be mixed with synthetic opioids such as Fentanyl, which can be fatal in small doses regardless of how they are taken.<sup>9</sup>

**Q. WHAT DOES HEROIN LOOK LIKE?**

**A. HEROIN CAN BE A WHITE OR DARK BROWN POWDER OR A BLACK TAR.** People selling heroin often mix in other substances, such as sugar, starch, or more dangerous chemicals.<sup>10</sup> Pure heroin is dangerous as well, despite the common misperception that it is safer.<sup>11</sup>

**Q. WILL HEROIN USE ALTER MY BRAIN?**

**A. YES.** Heroin use alters brain circuits that control reward, stress, decision-making, and impulse control, making it more difficult to stop using even when it is having negative effects on your life and health. Frequent use also can lead to tolerance and withdrawal, so you need more of the drug just to feel normal.<sup>12,13</sup>

### THE BOTTOM LINE:

Heroin is illegal, addictive, and dangerous. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

### LEARN MORE:

Get the latest information on how drugs affect the brain and body at [teens.drugabuse.gov](http://teens.drugabuse.gov).

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# SAMHSA

Substance Abuse and Mental Health Services Administration



# BEFORE YOU RISK IT!

- 1 KNOW THE LAW.** Heroin is an illegal Schedule I drug, meaning that it is addictive and has no accepted medical use.<sup>14</sup>
- 2 GET THE FACTS.** Any method of heroin use—snorting, smoking, swallowing, or injecting the drug—can cause immediate harm and lead to addiction or death.<sup>15</sup>
- 3 KNOW THE RISKS.** Using heroin can change the brain, and the changes may not be easily reversed.<sup>16</sup>
- 4 LOOK AROUND YOU.** The majority of teens are not using heroin. According to a 2015 national study, fewer than 1 out of 1,000 adolescents ages 12 to 17 were current heroin users.<sup>17</sup>



## WHAT CAN YOU DO TO HELP SOMEONE WHO IS USING HEROIN?

### BE A FRIEND. SAVE A LIFE.

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[findtreatment.samhsa.gov](http://findtreatment.samhsa.gov)

<sup>1,2,4,11,16,20</sup> National Institute on Drug Abuse. (2014). *Research report series: Heroin*. (NIH Publication Number 14-0165). Retrieved from <http://www.drugabuse.gov/sites/default/files/rrheroin14.pdf>

<sup>3,8,9,12,15</sup> National Institute on Drug Abuse. (2017). *Drug facts: Heroin*. Retrieved from <http://www.drugabuse.gov/publications/drugfacts/heroin>

<sup>5</sup> Drug Enforcement Agency. (2016). DEA warning to police and public: Fentanyl exposure kills. *Headquarters News*. Retrieved from <https://www.dea.gov/divisions/hq/2016/hq061016.shtml>

<sup>6</sup> National Institute on Drug Abuse. (2016). *Drug facts: Fentanyl*. Retrieved from <https://www.drugabuse.gov/publications/drugfacts/fentanyl>

<sup>7</sup> National Institute on Drug Abuse (NIDA). (2017). Drug overdoses in youth. *NIDA for Teens*. Retrieved from <https://teens.drugabuse.gov/drug-facts/drug-overdoses-youth>

<sup>10,14,18</sup> U.S. Department of Justice and Drug Enforcement Administration. (2015). *Drugs of abuse: A DEA resource guide*. Retrieved from [https://www.dea.gov/pr/multimedia-library/publications/drug\\_of\\_abuse.pdf](https://www.dea.gov/pr/multimedia-library/publications/drug_of_abuse.pdf)

<sup>13</sup> National Institute on Drug Abuse. (2007). Drugs on the street (Module 5). *Brain Power: Grades 6-9*. Retrieved from <http://www.drugabuse.gov/publications/brain-power/grades-6-9/drugs-street-module-5>

<sup>17</sup> Center for Behavioral Health Statistics and Quality. (2016). *2015 National Survey on Drug Use and Health: Detailed tables*. Retrieved from [http://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015.htm](http://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015_NSDUH-DetTabs-2015.htm)

<sup>19</sup> National Institute on Drug Abuse. (n.d.). Heroin (smack, junk) facts. *Easy-to-Read Drug Facts*. Retrieved from <https://easyread.drugabuse.gov/content/heroin-smack-junk-facts>



## KNOW THE SIGNS

### HOW CAN YOU TELL IF A FRIEND IS USING HEROIN?

Signs and symptoms of heroin use are:<sup>18,19,20</sup>

- **Euphoria**
- **Drowsiness**
- **Impaired mental functioning**
- **Slowed movement and breathing**
- **Needle marks**
- **Boils**

Signs of a heroin overdose include:

- **Shallow breathing**
- **Extremely small pupils**
- **Clammy skin**
- **Bluish-colored nails and lips**
- **Convulsions**
- **Coma**

The drug naloxone can save the life of someone overdosing on heroin. Naloxone can be administered by anyone witnessing an overdose or by first responders.

For more information on naloxone training and availability, visit [www.drugabuse.gov/related-topics/naloxone](http://www.drugabuse.gov/related-topics/naloxone).

## MORE INFORMATION



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PEP NO. 18-02 REVISED 2018

# TIPS for TEENS

## METHAMPHETAMINE

### THE TRUTH ABOUT METHAMPHETAMINE (METH)<sup>1</sup>

**SLANG: METH/SPEED/CRYSTAL/CRANK/CHALK/TINA/TWEAK/GO-FAST/ICE/GLASS/UPPERS**

## GET THE FACTS

**METHAMPHETAMINE AFFECTS YOUR BRAIN.** Meth causes changes in the brain circuits that control reward, stress, decision-making, and impulse control, making it more and more difficult to stop using even when it is having negative effects on your life and health. Frequent use also can lead to tolerance and withdrawal, so you need more of the drug just to feel normal. Additional effects of using meth can include anxiety and depression, chronic fatigue, paranoid or delusional thinking, and serious psychological illness.<sup>2,3</sup>

**METHAMPHETAMINE AFFECTS YOUR BODY.** Using meth increases heart rate, blood pressure, and risk of stroke. Other negative consequences of long-term meth use are extreme weight loss, severe dental problems ("meth mouth"), and skin sores caused by scratching.<sup>4</sup> Meth use affects the levels of dopamine in your brain. Dopamine is a neurotransmitter that affects, among other things, movement, motivation, emotions, and feelings of pleasure.<sup>5</sup> Because meth causes a flood of dopamine to the brain, the natural supply gets depleted. As a result, activities that would normally increase dopamine and, therefore, pleasure (such as listening to music or eating a delicious meal) may no longer do so, which can lead to depression.<sup>6</sup>

**METHAMPHETAMINE AFFECTS YOUR SELF-CONTROL.** Meth is an addictive drug that can cause aggression, violent behavior, and psychosis (loss of contact with reality).<sup>7,8</sup>

**METHAMPHETAMINE IS NOT ALWAYS WHAT IT SEEMS.** As much as 60 percent of what a person injects, snorts, or smokes is not meth. Powder sold as meth may contain many other substances, including lead acetate or mercury, both of which are toxins that can lead to poisoning.<sup>9,10</sup>

**METHAMPHETAMINE CAN KILL YOU.** High doses can cause the body to overheat to dangerous levels. Death can result from stroke, heart attack, or multiple organ problems caused by overheating.<sup>11</sup>

**METHAMPHETAMINE ADDICTION IS TREATABLE.** Behavioral treatments can help someone stop using methamphetamine and recover from addiction.<sup>12</sup>

## Q&A

### Q. WHAT DOES METH LOOK LIKE?

**A.** **Methamphetamine is a white, odorless, bitter-tasting, crystalline powder that dissolves easily in water or alcohol.<sup>13</sup>** It can be made from ingredients that are used in products such as batteries, drain cleaner, fertilizer, nail polish remover, and paint thinner.<sup>14</sup>

### Q. WHAT IS THE "CRASH" EFFECT OF USING METH?

**A.** **Using meth causes the brain to release a chemical called dopamine, which gives the user a feeling of pleasure.** However, once the drug is no longer in the user's system, this pleasurable sensation can be followed by unpleasant feelings of drug withdrawal, sometimes called a "crash".<sup>15</sup> These feelings can include depression, anxiety, fatigue, and intense craving for more of the drug.<sup>16</sup> The "crash" often leads a person to use more meth to avoid these uncomfortable physical and psychological effects.<sup>17</sup>

### THE BOTTOM LINE:

Methamphetamine (meth) is illegal, addictive, and dangerous. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

### LEARN MORE:

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**SAMHSA**  
Substance Abuse and Mental Health Services Administration



# BEFORE YOU RISK IT!

1

**KNOW THE LAW.** Methamphetamine is illegal in all states.<sup>18</sup>

2

**GET THE FACTS.** The ignitable, corrosive, and toxic nature of the chemicals used to produce meth can cause fires, produce toxic vapors, and damage the environment.<sup>19</sup>

3

**KNOW THE RISKS.** There are a lot of risks associated with using methamphetamine, including:<sup>20,21</sup>

- Meth use can cause a "crash" after the effects wear off.
- Meth use can cause long-lasting damage to the brain.
- Meth users who inject the drugs and share needles are at risk for acquiring HIV and hepatitis.

4

**LOOK AROUND YOU.** Not everyone is using methamphetamine. In 2015, less than 1 percent of adolescents ages 12 to 17 reported currently using methamphetamine.<sup>22</sup>



## KNOW THE SIGNS

How can you tell if a friend is using meth? It may not be easy to tell, but symptoms of methamphetamine use may include:<sup>23,24</sup>

- **Inability to sleep or unusual sleep patterns**
- **Psychotic behaviors such as paranoia and hallucinations**
- **Mood swings or increased aggression**
- **Nervous obsessive activities, such as scratching**
- **Irritability, anxiety, or confusion**
- **Extreme anorexia**
- **Changes in physical appearance, including deteriorating skin and teeth**
- **Presence of injecting paraphernalia, such as syringes, burnt spoons, or surgical tubing**

## MORE INFORMATION

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## WHAT CAN YOU DO TO HELP SOMEONE WHO IS USING METH?

### BE A FRIEND. SAVE A LIFE.

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<sup>18</sup> U.S. Department of Justice and Drug Enforcement Administration. (2015). *Drugs of abuse: A DEA resource guide*. Retrieved from [https://www.dea.gov/pr/multimedia-library/publications/drug\\_of\\_abuse.pdf](https://www.dea.gov/pr/multimedia-library/publications/drug_of_abuse.pdf)

<sup>19,20</sup> National Institute on Drug Abuse. (2013). *Research report series: Methamphetamine*. (NIH Publication Number 13-4210). Retrieved from <http://www.drugabuse.gov/sites/default/files/methrrs.pdf>

<sup>21,22</sup> Substance Abuse and Mental Health Services Administration. (2006). Opioids and club drugs slides. *Matrix Intensive Outpatient Treatment for People with Stimulant Use Disorders: Counselor's Family Education Manual*. Retrieved from <http://store.samhsa.gov/product/Matrix-Intensive-Outpatient-Treatment-for-People-with-Stimulant-Use-Disorders-Counselor-s-Family-Education-Manual-w-CD/SMA13-4153>

<sup>23</sup> National Institute on Drug Abuse (NIDA). (2009). Word of the day: Dopamine. *NIDA for Teens*. Retrieved from <https://teens.drugabuse.gov/blog/post/word-day-dopamine>

<sup>24</sup> National Institute on Drug Abuse. (2014). Drug facts: Methamphetamine (meth). *NIDA for Teens*. Retrieved from <http://teens.drugabuse.gov/drug-facts/methamphetamine-meth>

<sup>7</sup> National Institute on Drug Abuse. (n.d.). *Commonly abused drug charts*. Retrieved from <http://www.drugabuse.gov/drugs-abuse/commonly-abused-drugs/health-effects#meth>

<sup>8</sup> The Meth Project Foundation. (n.d.). What is meth-induced psychosis? *The Meth Project*. Retrieved from <http://www.methproject.org/answers/what-is-meth-induced-psychosis.html#Psychotic-Behavior>

<sup>9</sup> Fries, A., Anthony, R. W., Cseko, A., Gaither, C. C., & Shulman, E. (2008). *The price and purity of illicit drugs: 1981-2007*. Alexandria, VA: Institute for Defense Analyses. Retrieved from <https://www.documentcloud.org/documents/275358-the-price-and-purity-of-illicit-drugs-1981-2007.html>

<sup>10</sup> Poulsen, E. J., Mannis, M. J., & Chang, S. D. (1996). Keratitis in methamphetamine abusers. *Cornea* 15, 77-82.

<sup>12</sup> National Institute on Drug Abuse. (2013). What treatments are effective for people who abuse methamphetamine? *Research report series: Methamphetamine*. Retrieved from <https://www.drugabuse.gov/publications/research-reports/methamphetamine/what-treatments-are-effective-methamphetamine-abusers>

<sup>13</sup> National Institute on Drug Abuse. (2017). *Drug facts: Methamphetamine*. Retrieved from <http://www.drugabuse.gov/publications/drugfacts/methamphetamine>

<sup>14</sup> The Meth Project Foundation. (n.d.). What's in meth. *The Meth Project*. Retrieved from <http://www.methproject.org/answers/whats-meth-made-of.html#Whats-in-Meth>

<sup>15,17</sup> National Institute on Drug Abuse. (2006). The brain's response to methamphetamine. *NIDA for Teens*. Retrieved from <https://teens.drugabuse.gov/teachers/mind-over-matter/methamphetamine>

<sup>22</sup> Center for Behavioral Health Statistics and Quality. (2016). *Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health*. (HHS Publication No. SMA 16-4984, NSDUH Series H-51). Retrieved from [http://www.samhsa.gov/data/sites/default/files/NSDUH\\_FRR1-2015/NSDUH\\_FRR1-2015/NSDUH\\_FRR1-2015.htm](http://www.samhsa.gov/data/sites/default/files/NSDUH_FRR1-2015/NSDUH_FRR1-2015/NSDUH_FRR1-2015.htm)

<sup>23</sup> The Meth Project Foundation. (n.d.). How can I tell if someone is using meth? *The Meth Project*. Retrieved from <http://www.methproject.org/answers/how-can-i-tell-if-someone-is-using-meth.html#Signs-of-Use>

# TIPS for TEENS

## INHALANTS

### THE TRUTH ABOUT INHALANTS

**SLANG: GLUEY/HUFF/WHIPPETS/  
LAUGHING GAS/SNAPPERS/  
POPPERS/RUSH/BOLD<sup>6,7</sup>**

## GET THE FACTS

**INHALANTS AFFECT YOUR BRAIN.** Inhalants are gases or fumes from everyday products that are inhaled or sniffed to cause an immediate high. Inhalants cut off oxygen to the brain and can damage your ability to think clearly, cause you to become clumsy, and harm your eyesight. Some of this damage can be permanent.<sup>8</sup>

**INHALANTS AFFECT YOUR HEART.** Inhalants starve the body of oxygen and force the heart to beat rapidly and irregularly. Your heart may even stop pumping blood.<sup>9</sup>

**INHALANTS AFFECT OTHER PARTS OF YOUR BODY.** People who use inhalants often experience nausea and vomiting. Continued use of inhalants can lead to loss of hearing; damage to the sense of smell; loss of muscle control; and increased risk of cancer, as well as liver, lung, and kidney problems.<sup>10,11</sup>

**INHALANTS CAN CAUSE SUDDEN DEATH.** Inhalants can kill you instantly. Immediate heart failure and death, known as "sudden sniffing death," happens when the heart stops pumping blood. Inhalant users also can die by suffocating, choking on their vomit, or experiencing a seizure.<sup>12</sup> Using inhalants from an attached paper or plastic bag or in a closed area greatly increases the chances of suffocation and death.



## Q&A

**Q. SINCE INHALANTS ARE FOUND IN HOUSEHOLD PRODUCTS, AREN'T THEY SAFE?**

**A. NO.** Even though household products such as spray paint, glue, and gasoline have legal and useful purposes, they are harmful and dangerous when used as inhalants. These products are not intended to be inhaled.<sup>1</sup>

**Q. DOESN'T IT TAKE MANY "HUFFS" BEFORE YOU'RE IN DANGER?**

**A. NO.** The first "huff" can kill you.<sup>2</sup> Or the 10th. Or the 100th. Every huff can be dangerous. Even if you have tried inhalants before without experiencing a problem, there's no way of knowing how your body will react the next time.<sup>3</sup>

**Q. CAN INHALANTS MAKE ME LOSE CONTROL?**

**A. YES.** Inhalants affect your brain and can cause you to feel less inhibited and less in control. You can become reckless, uncoordinated, and aggressive.<sup>4,5</sup>

### THE BOTTOM LINE:

Inhalants are dangerous and can be deadly. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

### LEARN MORE:

Get the latest information on how drugs affect the brain and body at [teens.drugabuse.gov](http://teens.drugabuse.gov).

### TO LEARN MORE ABOUT INHALANTS, CONTACT:

**SAMHSA**

**1-877-SAMHSA-7 (1-877-726-4727)**

(English and Español)

**TTY 1-800-487-4889**

[www.samhsa.gov](http://www.samhsa.gov)

[store.samhsa.gov](http://store.samhsa.gov)



**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration



# BEFORE YOU RISK IT!

**1**

**GET THE FACTS.** Inhalants can kill you the very first time you use them.<sup>13</sup>

**2**

**STAY INFORMED.** Gases and fumes from chemicals in everyday products are dangerous when inhaled on purpose. Any method used to inhale these substances can kill you.<sup>14,15</sup>

**3**

**BE AWARE.** Inhalants can be addictive. The effects last only a few minutes, creating an urge to sniff or inhale a substance over and over again. Inhalant users also can suffer from withdrawal.<sup>16,17</sup>

**4**

**KNOW THE RISKS.** Long-term inhalant users may permanently lose the ability to perform everyday functions such as walking and talking.<sup>18</sup>

**5**

**LOOK AROUND YOU.** The majority of teens aren't using inhalants. According to a 2015 national survey, less than 1 percent of teens (ages 12 to 17) were current users of inhalants.<sup>19</sup>

## MORE INFORMATION

FOR MORE INFORMATION OR FOR  
RESOURCES USED IN THIS

## "TIPS for TEENS,"

visit [store.samhsa.gov](http://store.samhsa.gov) or call

**1-877-SAMHSA-7 (1-877-726-4727)**

(English and Español).

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## KNOW THE SIGNS

How can you tell if a friend is using inhalants? Sometimes it's tough to tell. Symptoms of inhalant use may include:<sup>20,21</sup>

- **Slurred speech**
- **Drunk, dizzy, or dazed appearance**
- **Unusual breath odor**
- **Chemical smell on clothing**
- **Paint stains on body or face**
- **Red eyes**
- **Runny nose**



## WHAT CAN YOU DO TO HELP SOMEONE WHO IS USING INHALANTS?

### BE A FRIEND. SAVE A LIFE.

Encourage your friend to stop using or seek help from a parent, teacher, or other caring adult.

For 24/7 free and confidential information and treatment referrals in English and Spanish, call SAMHSA's National Helpline at:

**1-800-662-HELP (1-800-662-4357)**

or visit the SAMHSA Behavioral Health Treatment Services Locator at  
[findtreatment.samhsa.gov](http://findtreatment.samhsa.gov)

<sup>1,7,16,18</sup> National Institute on Drug Abuse (NIDA). (n.d.). Drug facts: Inhalants. *NIDA for Teens*. Retrieved from <https://teens.drugabuse.gov/drug-facts/inhalants>

<sup>2,8,13</sup> NIDA. (2017). Drug facts: Inhalants. Retrieved from <https://www.drugabuse.gov/publications/drugfacts/inhalants>

<sup>3,4,9,10,11,12,15,17,20</sup> NIDA. (2012). Research report series: Inhalants. (NIH Publication Number 12-3818). Retrieved from <https://www.drugabuse.gov/publications/research-reports/inhalants>

<sup>5</sup> Howard, M. O., Perron, B. E., Vaughn, M. G., Bender, K. A., & Garland, E. (2010). Inhalant use, inhalant-use disorders, and antisocial behavior: Findings from the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC). *Journal of Studies on Alcohol and Drugs*, 71, 201-209. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/20230717>

<sup>6,14,21</sup> U.S. Department of Justice & Drug Enforcement Administration. (2011). Drugs of abuse: A DEA resource guide. Retrieved from [https://www.dea.gov/pr/multimedia-library/publications/drug\\_of\\_abuse.pdf#page=78](https://www.dea.gov/pr/multimedia-library/publications/drug_of_abuse.pdf#page=78)

<sup>19</sup> Center for Behavioral Health Statistics and Quality. (2016). Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health. (HHS Publication No. SMA 16-4984, NSDUH Series H-51). Retrieved from <http://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015/NSDUH-FFR1-2015/NSDUH-FFR1-2015.htm>

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